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VIA FACSIMILE: (571) 273-8300

PATENT  
ABS01 P-100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group : 3652  
Examiner : Charles N. Greenhut  
Applicants : Philip J. Quenzi and Richard W. Jenney  
Serial No. : 10/796,619  
Filed : March 9, 2004  
For : CARGO TRAILER

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Via Facsimile: (571) 273-8300

Dear Sir or Madam:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

1. Claims As Amended Transmittal Sheet (1 page, in duplicate)
2. Response (19 pages)
3. A copy of the electronic Information Disclosure Statement filed on August 23, 2004 (3 pages)

YOU SHOULD RECEIVE A TOTAL OF 25 PAGES.

Date: October 20, 2005

Susan L. Gasper  
Susan L. Gasper  
Van Dyke, Gardner, Linn & Burkhardt, LLP  
2851 Charlevoix Drive, S.E., Suite 207  
P.O. Box 888695  
Grand Rapids, Michigan 49588-8695  
(616) 975-5500

TAF/slg

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Dear Sir:

Transmitted herewith is an amendment in the above identified application.  
 The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity	Other Than Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate
Total Claims	* 53	Minus	** 57	= 0	x \$25	\$ .00	x \$50
Independent Claims	* 4	Minus	*** 4	= 0	x \$100	\$ .00	x \$200
First Presentation of Multiple Dependent Claims						\$180	\$ .00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0.00	\$ .00

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Small entity status of this application has been established.
- No additional Fee is required.
- A check in the amount of \$ \_\_\_\_\_ is attached.
- Please charge any additional fees or credit overpayment to Deposit Account No. 22-0190.  
A duplicate copy of this sheet is attached.

VAN DYKE, GARDNER, LINN &amp; BURKHART, LLP

Date: October 20, 2005

By Timothy A. Flory  
 Timothy A. Flory, Registration No. 42 540  
 2851 Charlevoix Drive, S.E.  
 P.O. Box 888695  
 Grand Rapids, Michigan 49588-8695  
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